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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/847,620	05/02/2001	Jong-Kon Choi	9903-14	5622

7590 06/18/2003

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EXAMINER

MITCHELL, JAMES M

ART UNIT

PAPER NUMBER

2827

DATE MAILED: 06/18/2003

Please find below and/or attached an Office communication concerning this application or proceeding.

Interview Summary	Application No.	Applicant(s)
	09/847,620	JONG-KON CHOI
	Examiner	Art Unit
	James Mitchell	2827

All participants (applicant, applicant's representative, PTO personnel):

(1) James Mitchell. (3) _____.

(2) Hosan Lee. (4) _____.

Date of Interview: 05 June 2003.

Type: a) Telephonic b) Video Conference
c) Personal [copy given to: 1) applicant 2) applicant's representative]

Exhibit shown or demonstration conducted: d) Yes e) No.
If Yes, brief description: _____.

Claim(s) discussed: _____.

Identification of prior art discussed: _____.

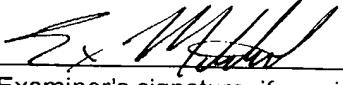
Agreement with respect to the claims f) was reached. g) was not reached. h) N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Applicant inquired about inconsistency in office action that claim 3 was indicated as both rejected and allowable. Examiner stated that the claim 3 rejection was in error and that the indicated allowability was correct.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

DAVID E. GRAYBILL
PRIMARY EXAMINER


Examiner's signature, if required

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.